Period   Prior Name   Middle Name   Last	Deh	tor 1 AA	RON JAMES S	AI 7FR			
United States Bankruptory Court for the: DISTRICT OF MINNESOTA  Case number 22-50273 WJF    Check if this is an amended filling    Check if this is an amended schedule for supplied in this part of this part of thi	200				Last Name		
United States Bankruptcy Court for the: DISTRICT OF MINNESOTA  Case number 22-50273 WJF    Check if this is an amended filing			Name	Middle Name	Last Name		
Case number 22-50273 WJF    Check if this is an amended filing		3,					
Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets  Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Unit	ed States Bankrupto	y Court for the:	DISTRICT OF MINNESC	DIA		
Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  POINTS:  Summarize Your Assets  Your assets  Value of what you own  1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B			73 WJF			<b>—</b> Oha	ala if their in an
Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct niformation. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  1: Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 52, Total real estate, from Schedule A/B	(II KIII	, (i)				_	
Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct niformation. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  1: Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 52, Total real estate, from Schedule A/B							-
Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct niformation. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  1: Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 52, Total real estate, from Schedule A/B	∩fí	icial Form 1	06Sum				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	_			and I iabilities an	d Certain Statistical Information		12/15
Part 1: Summarize Your Assets    Your assets Value of what you own						for supply	
Summarize Your Assets  Your assets Vallue of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55. Total real estate, from Schedule A/B	nfor	mation. Fill out all	of your schedul	es first; then complete the	information on this form. If you are filing amen		
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55. Total real estate, from Schedule A/B				new Summary and Check	the box at the top of this page.		
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Part	1: Summarize Y	our Assets				
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B							
1a. Copy line 55, Total real estate, from Schedule A/B						value	or what you own
1c. Copy line 63, Total of all property on Schedule A/B	1.	1a. Copy line 55, T	<b>operty</b> (Official Fo otal real estate, f	orm 106A/B) rom Schedule A/B		\$	500,000.00
Part 2: Summarize Your Liabilities  Your liabilities Amount you owe  2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		1b. Copy line 62, T	otal personal pro	perty, from Schedule A/B		\$	31,862.78
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		1c. Copy line 63, To	otal of all property	y on Schedule A/B		\$	531,862.78
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	Part	2: Summarize Y	our Liabilities				
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F						Vour	liabilities
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  342,610.76  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F							
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	2.					•	242 640 76
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		2a. Copy the total y	ou listed in Colu	nn A, <i>Amount of claim,</i> at th	ne bottom of the last page of Part 1 of Schedule D	\$	342,610.76
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	3.	Schedule E/F: Cred	ditors Who Have	Unsecured Claims (Official	Form 106E/F)	\$	0.00
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I							244 222 47
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		3b. Copy the total	ciaims from Part	2 (nonpriority unsecured cia	aims) from line 6j of S <i>chedule E/F</i>	\$	644,032.47
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I					Vour total liabilitie	e ¢	086 643 33
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I					rour total nashitie	• <u> </u>	900,043.23
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	Part	3: Summarize Y	our Income and	Expenses		·	
Copy your combined monthly income from line 12 of Schedule I				•			
Copy your monthly expenses from line 22c of <i>Schedule J.</i> S 5,239.70  Part 4: Answer These Questions for Administrative and Statistical Records  6. Are you filing for bankruptcy under Chapters 7, 11, or 13?	4.		`	,	l	\$	1,861.23
Copy your monthly expenses from line 22c of <i>Schedule J.</i> S 5,239.70  Part 4: Answer These Questions for Administrative and Statistical Records  6. Are you filing for bankruptcy under Chapters 7, 11, or 13?	5.	Schedule J: Your E	xpenses (Official	Form 106J)			
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?		Copy your monthly	expenses from li	ne 22c of Schedule J		\$	5,239.70
	Part	4: Answer Thes	e Questions for	Administrative and Statis	stical Records		
No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.	6.	Are you filing for I	bankruptcy und	er Chapters 7, 11, or 13?			
		☐ No. You have	nothing to report	on this part of the form. Ch	eck this box and submit this form to the court with y	our other so	chedules.

- What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

\$			

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$
9g. <b>Total.</b> Add lines 9a through 9f.	\$

Debtor 1	AARON JAMES SAL	ZER			
	First Name	Middle Name Last N	ame		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Last N	ame		
United States Ba	inkruptcy Court for the: DIS	TRICT OF MINNESOTA			
Case number _	22-50273 WJF				☐ Check if this is ar amended filing
Official Fo	orm 106A/B				
Schedul	e A/B: Proper	ty			12/15
Answer every ques	stion. Each Residence, Building, Lar	parate sheet to this form. On the top of	ave an Interest In		. ,
•	have any legal or equitable inte	rest in any residence, building, land, c	or similar property?		
No. Go to Par					
_	t 2. s the property?				
_					
Yes. Where		What is the property? Chack	k all that apply		
Yes. Where	s the property?	What is the property? Check	k all that apply	Do not deduct occurred electron	simo ar accompliano Dut
Yes. Where in the second of th	s the property?	Single-family home		Do not deduct secured clause amount of any secure	d claims on Schedule D:
Yes. Where in the second of th	s the property?  YY 25 NE	Single-family home  Duplex or multi-unit by	uilding		d claims on Schedule D:
Yes. Where in the second of th	s the property?  YY 25 NE	Single-family home  Duplex or multi-unit by  Condominium or coop	uilding perative	the amount of any secure	d claims on Schedule D:
Yes. Where it	s the property?  YY 25 NE  if available, or other description	Single-family home  Duplex or multi-unit by Condominium or coop  Manufactured or mob	uilding perative	the amount of any secure Creditors Who Have Clair  Current value of the	d claims on Schedule D: ms Secured by Property.  Current value of the
Yes. Where in the second of th	s the property?  YY 25 NE	Single-family home  Duplex or multi-unit by Condominium or coop  Manufactured or mob  Land	uilding perative	the amount of any secure Creditors Who Have Claim  Current value of the entire property?	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?
Yes. Where it	s the property?  YY 25 NE  if available, or other description  MN 56367-1	Single-family home  Duplex or multi-unit by Condominium or coop  Manufactured or mob  Land	uilding perative	the amount of any secure Creditors Who Have Clair  Current value of the entire property? \$500,000.00	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$500,000.00
1.1 16840 HW Street address,	s the property?  YY 25 NE  if available, or other description  MN 56367-1	Single-family home  Duplex or multi-unit by Condominium or coop  Manufactured or mob Dude  Investment property Timeshare Other	uilding perative ile home	Current value of the entire property? \$500,000.00  Describe the nature of y (such as fee simple, ten	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$500,000.00
Yes. Where it	s the property?  YY 25 NE  if available, or other description  MN 56367-1	Single-family home Duplex or multi-unit by Condominium or coop Manufactured or mob Dude Investment property Timeshare Other Who has an interest in the	uilding perative ile home	current value of the entire property? \$500,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$500,000.00
1.1 16840 HW Street address, Rice City	s the property?  YY 25 NE  if available, or other description  MN 56367-1	Single-family home Duplex or multi-unit by Condominium or coop Manufactured or mob Dade Investment property Timeshare Other Who has an interest in the Debtor 1 only	uilding perative ile home	Current value of the entire property? \$500,000.00  Describe the nature of y (such as fee simple, ten	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$500,000.00
Yes. Where it	s the property?  YY 25 NE  if available, or other description  MN 56367-1	Single-family home Duplex or multi-unit by Condominium or coop Manufactured or mob Land Investment property Timeshare Other Who has an interest in the Debtor 1 only Debtor 2 only	uilding perative lile home	Current value of the entire property? \$500,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Fee simple	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$500,000.00  rour ownership interest ancy by the entireties, or
1.1 16840 HW Street address,  Rice City	s the property?  YY 25 NE  if available, or other description  MN 56367-1	Single-family home Duplex or multi-unit by Condominium or coop Manufactured or mob Dade Investment property Timeshare Other Who has an interest in the Debtor 1 only	uilding perative ille home  property? Check one	current value of the entire property? \$500,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$500,000.00  rour ownership interest ancy by the entireties, or
1.1 16840 HW Street address,  Rice City	s the property?  YY 25 NE  if available, or other description  MN 56367-1	Single-family home Duplex or multi-unit by Condominium or coop Manufactured or mob Land Investment property Timeshare Other Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2	uilding perative lile home property? Check one 2 only btors and another	Current value of the entire property? \$500,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Fee simple  Check if this is com (see instructions)	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$500,000.00  rour ownership interest ancy by the entireties, or
1.1 16840 HW Street address,  Rice City	s the property?  YY 25 NE  if available, or other description  MN 56367-1	Single-family home Duplex or multi-unit by Condominium or coop Manufactured or mob Duplex Duplex or multi-unit by Condominium or coop Manufactured or mob Duplex Duplex Destroem Investment property Timeshare Other Uho has an interest in the Dupletor 1 only Dupletor 2 only Dupletor 1 and Dupletor 2 Duplet	uilding perative lile home property? Check one 2 only btors and another in to add about this item inber:	the amount of any secure Creditors Who Have Clair  Current value of the entire property? \$500,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Fee simple  Check if this is com (see instructions)  n, such as local	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$500,000.00  rour ownership interest ancy by the entireties, or
1.1 16840 HW Street address,  Rice City	s the property?  YY 25 NE  if available, or other description  MN 56367-1	Single-family home Duplex or multi-unit by Condominium or coop Manufactured or mob Duplex or multi-unit by Condominium or coop Manufactured or mob Duplex or multi-unit by Condominium or coop Manufactured or mob Debtor 1 mob Duple Timeshare Other Who has an interest in the Duple Duple Timeshare Duple T	uilding perative ille home  property? Check one  2 only btors and another n to add about this item nber: ED AS: SEE ATTAG	the amount of any secure Creditors Who Have Clair  Current value of the entire property? \$500,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Fee simple  Check if this is com (see instructions)  n, such as local	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$500,000.00  rour ownership interest ancy by the entireties, or
1.1 16840 HW Street address,  Rice City	s the property?  YY 25 NE  if available, or other description  MN 56367-1	Single-family home Duplex or multi-unit by Condominium or coop Manufactured or mob Duplex Duplex or multi-unit by Condominium or coop Manufactured or mob Duplex Duplex Destroin the Supplement of the delegate of the delegat	uilding perative ille home  property? Check one  2 only btors and another n to add about this item nber: ED AS: SEE ATTAG	the amount of any secure Creditors Who Have Clair  Current value of the entire property? \$500,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Fee simple  Check if this is com (see instructions)  n, such as local	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$500,000.00  rour ownership interest ancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Debu	) A	ARON JAW	IES SALZER		Case number (if	known) <u>22-</u>	502/3 WJF	
. Ca	rs, vans,	trucks, tract	ors, sport utility ve	ehicles, motorcycles				
	Nο							
	Yes							
	. 00							
3.1	Make:	DODGE		Who has an interest in the property? Check one			laims or exemptions. Put	
	Model:	RAM 1500	0	■ Debtor 1 only			ed claims on Schedule D: ims Secured by Property.	
	Year:	2003		Debtor 2 only	Current v	alue of the	Current value of the	
		nate mileage:	130,000+	☐ Debtor 1 and Debtor 2 only	entire pro	perty?	portion you own?	
		ormation:	0400040	At least one of the debtors and another				
	VIN: 1L	D7HU18N73	35136248	☐ Check if this is community property		\$1,000.00	\$1,000.00	
	_	BEEN DRI - RUSTED		(see instructions)				
	•	oato, tranoro,	motoro, porocinar in	atercraft, fishing vessels, snowmobiles, motorcy	00 0000001100			
		NOVA		Who has an interest in the manual O				
4.1	Make:	NOVA TRAILER	(USED IN	Who has an interest in the property? Check one			laims or exemptions. Put ed claims on Schedule D:	
	Model:	BUSINES		■ Debtor 1 only			e Claims Secured by Property.	
	Year:	2015		Debtor 2 only		alue of the	Current value of the	
	Other inf	ormation:		Debtor 1 and Debtor 2 only	entire pro	perty?	portion you own?	
				☐ At least one of the debtors and another☐ Check if this is community property	\$	1,200.00	\$1,200.00	
	VIN: 5	7MCS2022F	A001808	(see instructions)	<del>`</del>			
.pa Part 3	ges you  Descri	have attache	ed for Part 2. Write	wn for all of your entries from Part 2, including that number heretems  nterest in any of the following items?		=>	\$2,200.00  Current value of the portion you own?  Do not deduct secured	
112	uaak al-l	maada aad 6	umaiohine-				claims or exemptions.	
Ex		<b>goods and f</b> Major applian		s, china, kitchenware				
	Yes. De	scribe						
			NORMAL HOU	SEHOLD GOODS & FURNISHINGS			\$1,975.00	
E>	No		· · · · · · · · · · · · · · · · · · ·	deo, stereo, and digital equipment; computers, pr media players, games	rinters, scanners;	music collecti	ions; electronic devices	
	20							
			CELL PHONE S	\$200				
			4 TVS \$300				\$600.00	

8.	<ul> <li>Collectibles of value</li> <li>Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or bother collections, memorabilia, collectibles</li> <li>No</li> </ul>	paseball card collections;
	☐ Yes. Describe	
9.	<ul> <li>Equipment for sports and hobbies</li> <li>Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and I musical instruments</li> </ul>	kayaks; carpentry tools;
	■ No □ Yes. Describe	
10.	<ul> <li>Firearms         Examples: Pistols, rifles, shotguns, ammunition, and related equipment         □ No     </li> </ul>	
	Yes. Describe	
	USED IN BUSINESS VENTURES FOR SECURITY AND ANIMAL CONTROL: OPMS AR10 \$225 & AR15 \$129 SMITH & WESSON MP SHIELD 40 \$400 GLOCK 21 - \$400	\$1,154.00
11.	<ul> <li>1. Clothes         <ul> <li>Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories</li> <li>□ No</li> <li>■ Yes. Describe</li> </ul> </li> </ul>	
	[	****
	NORMAL WEAR APPAREL	\$600.00
	<ul> <li>2. Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,  No  Yes. Describe</li> <li>3. Non-farm animals  Examples: Dogs, cats, birds, horses  No  Yes. Describe</li> </ul>	silver
	2 DOGS	\$0.00
	4. Any other personal and household items you did not already list, including any health aids you did not list  ■ No □ Yes. Give specific information	
15	15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$4,329.00
	Part 4: Describe Your Financial Assets	
De	Do you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	6. Cash  Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition  □ No  ■ Yes	

Case number (if known) 22-50273 WJF

Debtor 1

**AARON JAMES SALZER** 

			CASH ON HAND	\$40.00
institutions. I	ivings, or other financial accounts f you have multiple accounts with	; certificates of deposit; shares in the same institution, list each.	credit unions, brokerage	houses, and other similar
□ No ■ Yes		Institution name:		
	17.1. <b>CHECKING - 9567</b>	BANK VISTA		\$1.80
_ `		ge firms, money market accounts		
■ No □ Yes	Institution or issuer name	<b>Э</b> :		
joint venture □ No	·	d and unincorporated business	es, including an intere	st in an LLC, partnership, and
■ Yes. Give specific info	ormation about them  Name of entity:		% of ownership:	
	NORTH BENTON INVES	STMENTS INC. D/B/A OLD		
	THE DEBTOR BELIEVE VALUE TO HIS INTERS		%	\$0.00
	NORTH BENTON PROP	ERITIES, LLC		
	THE DEBTOR BELIEVES VALUE TO HIS INTERS		%	\$0.00
	S&S EVENT SERVICES,	LLC		
	THE DEBTOR BELIEVES VALUE TO HIS INTERS		%	\$0.00
		R HAS YET TO PLANT O THE DEBTOR DOESN'T		<b>\$450.00</b>
	KNOW IF THIS WILL HA	APPEN OR NOT)	%	\$450.00
Negotiable instruments	include personal checks, cashiers ents are those you cannot transfer	e and non-negotiable instrumer decks, promissory notes, and notes to someone by signing or deliver	noney orders.	
21. Retirement or pension  Examples: Interests in II  No		), thrift savings accounts, or other	pension or profit-sharing	plans
☐ Yes. List each account	t separately. Type of account:	Institution name:		

Case number (if known) 22-50273 WJF

Debtor 1

**AARON JAMES SALZER** 

D	ebtor 1 A	ARON JAMES SALZER		Case number (if known)	22-50273 WJF	
22.	Your share	curity deposits and prepayments our share of all unused deposits you have made so that you may continue service or use from a company amples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others				
	Yes		Institution name or individual:			
23.	Annuities (	A contract for a periodic paym	ent of money to you, either for life or for a number of	f years)		
	Yes	Issuer name and de	escription.			
24.		an education IRA, in an acc § 530(b)(1), 529A(b), and 529	ount in a qualified ABLE program, or under a qua(b)(1).	alified state tuition prog	ram.	
	☐ Yes	Institution name and	d description. Separately file the records of any interest	ests.11 U.S.C. § 521(c):		
25.	Trusts, equ	uitable or future interests in	property (other than anything listed in line 1), and	d rights or powers exer	cisable for your benefit	
	☐ Yes. Give	e specific information about th	em			
26	Examples:  No		secrets, and other intellectual property ites, proceeds from royalties and licensing agreementem	nts		
27	Examples:	ranchises, and other genera Building permits, exclusive lic e specific information about th	enses, cooperative association holdings, liquor licen	ses, professional licenses	S	
М	oney or prop	perty owed to you?			Current value of the	
					portion you own? Do not deduct secured claims or exemptions.	
28.	Tax refund	s owed to you				
	Yes. Give	e specific information about the	em, including whether you already filed the returns ar	nd the tax years		
			2020 AND 2021 FEDERAL, STATE, AND PROPERTY TAX REFUNDS, IF ANY, AND 2022 FEDERAL, STATE, MN PROPERTY TAX REFUNDS ACCRUED FROM 01/01/22 TO DATE OF FILING.  THE DEBTOR HAS NOT FILED THESE RETURNS YET, THE SCHEDULES MAY BE AMENDED TO DISCLOSE REFUNDS AND CLAIM ANY EXEMPTIONS		E Unknown	
29.	■ No	Past due or lump sum alimon	y, spousal support, child support, maintenance, divo	rce settlement, property s	ettlement	
	☐ Yes. Give	e specific information				
30	Examples:	benefits; unpaid loans you ma	rance payments, disability benefits, sick pay, vacationade to someone else	n pay, workers' compens	sation, Social Security	
	IIVos Give	a enacific information				

Debtor 1	AARON JAMES SALZER	Case number (if known)	22-50273 WJF
	sts in insurance policies  ples: Health, disability, or life insurance; health savings account (HSA); cr	edit, homeowner's, or renter's insurar	nce
	. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	LIFE INSURANCE POLICY THROUGH AMERICAN GENERAL LIFE INSURANCE COMPANY	BUSINESS 50% / KIDS 50%	\$21,841.98
If you some No	nterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance one has died.  Give specific information	policy, or are currently entitled to rec	eive property because
Exam ■ No	s against third parties, whether or not you have filed a lawsuit or mach ples: Accidents, employment disputes, insurance claims, or rights to sue  Describe each claim	de a demand for payment	
■ No	contingent and unliquidated claims of every nature, including counter.  Describe each claim	erclaims of the debtor and rights to	set off claims
□ No	nancial assets you did not already list  . Give specific information		
	ACCRUED BUT UNPAID WAGES	(ESTIMATED)	\$1,000.00
	the dollar value of all of your entries from Part 4, including any entrie		\$23,333.78
Part 5: Do	escribe Any Business-Related Property You Own or Have an Interest In. List a	ny real estate in Part 1.	
□ No. G	own or have any legal or equitable interest in any business-related property? o to Part 6.  Go to line 38.		
			Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	unts receivable or commissions you already earned  . Describe		
Exam ■ No	equipment, furnishings, and supplies  pples: Business-related computers, software, modems, printers, copiers, fa  Describe	x machines, rugs, telephones, desks	, chairs, electronic devices
□ No	nery, fixtures, equipment, supplies you use in business, and tools of  Describe	your trade	

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1	AARON	IVWEG	CAL 7E

Case number (if known) 22-50273 WJF

\$0.00

	2004 SIMPLICITY RIDING LAWN MOW	/ER \$500	\$2,000.0
41. Inventory			
■ No			
☐ Yes. Describe			
42. Interests in partnershi	ps or joint ventures		
■ No			
☐ Yes. Give specific info	ormation about them Name of entity:	% of ownership:	
43. Customer lists, mailing  ■ No.	g lists, or other compilations		
	rsonally identifiable information (as defined in 11 U.	.S.C. § 101(41A))?	
■ No			
☐ Yes. Describe	<del>)</del>		
•	property you did not already list		
■ No			
☐ Yes. Give specific info	rmation		
	of all of your entries from Part 5, including a number here		\$2,000.00
	and Commercial Fishing-Related Property You Ow interest in farmland, list it in Part 1.	n or Have an Interest In.	
•	ny legal or equitable interest in any farm- or	commercial fishing-related property?	
No. Go to Part 7.			
☐ Yes. Go to line 47.			
Part 7: Describe All Pro	operty You Own or Have an Interest in That You Did	d Not List Above	
	perty of any kind you did not already list? ets, country club membership		
■ No			
☐ Yes. Give specific info	ormation		

ITEMS USED IN APPLE ORCHARD BUSINESS:

**GARDENING & LAWN EQUIPMENT \$500** 

HAND & POWER TOOLS \$1000

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

Debtor 1 AARON JAMES SALZER		Case number (if known)	22-50273 WJF
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$500,000.00
56. Part 2: Total vehicles, line 5	\$2,200.00		
57. Part 3: Total personal and household items, line 15	\$4,329.00		
58. Part 4: Total financial assets, line 36	\$23,333.78		
59. Part 5: Total business-related property, line 45	\$2,000.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54	+ \$0.00		
62. <b>Total personal property.</b> Add lines 56 through 61	\$31,862.78	Copy personal property to	otal <b>\$31,862.78</b>

\$531,862.78

63. Total of all property on Schedule A/B. Add line 55 + line 62

#### EXHIBIT 'A'

The South 22.47 feet of the South Half of the Northwest Quarter (5½ of NW¼) of Section Four (4), Township Thirty-eight (38) North, Range Thirty (30) West, Fourth Principal Meridian, Benton County, Minnesota, together with that part of the North Half of the Southwest Quarter (N½ of SW¼) of said Section Four (4) lying northerly of the following described line:

Commencing at the southwest corner of said Section 4; thence North 2° 01' 05" West (assumed bearing) along the west line thereof for 1518.59 feet to the point of beginning of the line to be described; thence North 87° 58' 55" East for 375.78 feet; thence North 2° 01' 05" West for 316.10 feet; thence North 80° 42' 45" East for 673.75 feet; thence North 0° 58' 55" West for 385.44 feet; thence South 76° 08' 55" East for 1687.72 feet to the east line of said North Half of the Southwest Quarter and there terminating.

A.P.N. 04.00042.01

Fill in this info	rmation to identify your	case:		
Debtor 1	AARON JAMES S	SALZER		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF MINNESOTA		
Case number	22-50273 WJF			
(if known)				☐ Check if this is an
				amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exemp
--

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/E	that you claim as exe	empt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
			eck only one box for each exemption.						
	16840 HWY 25 NE Rice, MN 56367 Benton County	\$500,000.00		\$157,389.24	Minn. Stat. §§ 510.01, 510.02				
	LEGALLY DESCRIBED AS: SEE ATTACHED EXHIBIT A, BENTON COUNTY, MINNESOTA			100% of fair market value, up to any applicable statutory limit					
	PIN: 040004201 Line from <i>Schedule A/B</i> : 1.1								
	2003 DODGE RAM 1500 130,000+ miles	\$1,000.00		\$1,000.00	Minn. Stat. § 550.37 subd. 12a				
	VIN: 1D7HU18N73S136248			100% of fair market value, up to any applicable statutory limit					
	HASNT BEEN DRIVEN IN YEARS - RUSTED OUT			. , ,,,					
	Line from Schedule A/B: 3.1								
	2015 NOVA TRAILER (USED IN BUSINESS)	\$1,200.00		\$1,200.00	Minn. Stat. § 550.37 subd. 6				
	VIN: 57MCS2022FA001808 Line from <i>Schedule A/B</i> : <b>4.1</b>			100% of fair market value, up to any applicable statutory limit					

Deptor	1 AARON JAMES SALZER			Case number (if known)	22-502/3 WJF
	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim	Specific laws that allow exemption
	DRMAL HOUSEHOLD GOODS &	\$1,975.00		\$1,975.00	Minn. Stat. § 550.37 subd. 4(b)
_	IRNISHINGS e from <i>Schedule A/B</i> : <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
_	ELL PHONE \$200 FVS \$300	\$600.00		\$300.00	Minn. Stat. § 550.37 subd. 4(b)
LA	APTOP \$100 le from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	SED IN BUSINESS VENTURES FOR CURITY AND ANIMAL CONTROL:	\$1,154.00		\$1,154.00	Minn. Stat. § 550.37 subd. 6
SN \$4 GL	PMS AR10 \$225 & AR15 \$129 MITH & WESSON MP SHIELD 40 00 LOCK 21 - \$400 Le from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
	DRMAL WEAR APPAREL e from Schedule A/B: 11.1	\$600.00	•	\$600.00	Minn. Stat. § 550.37 subd. 4(a)
LIII	e Holli Genedale 74 B. TTT			100% of fair market value, up to any applicable statutory limit	
	DMESTEAD LAND LEASE - 50/YEAR FOR LAND RENTAL	\$450.00		\$450.00	Minn. Stat. §§ 510.01, 510.02
(R FC DC HA	ENTER HAS YET TO PLANT HAY OR THE YEAR, SO THE DEBTOR DESN'T KNOW IF THIS WILL APPEN OR NOT) In the from Schedule A/B: 19.4			100% of fair market value, up to any applicable statutory limit	
	FE INSURANCE POLICY THROUGH	\$21,841.98		\$10,000.00	Minn. Stat. § 550.37 subd. 23
IN: Be 50	SURANCE COMPANY neficiary: BUSINESS 50% / KIDS			100% of fair market value, up to any applicable statutory limit	
	CCRUED BUT UNPAID WAGES STIMATED)	\$1,000.00		75%	Minn. Stat. § 550.37 subd. 13
•	e from Schedule A/B: 35.1			100% of fair market value, up to any applicable statutory limit	
	EMS USED IN APPLE ORCHARD JSINESS:	\$2,000.00		\$2,000.00	Minn. Stat. § 550.37 subd. 6
H <i>A</i> G <i>A</i> \$5 20 M(	AND & POWER TOOLS \$1000 ARDENING & LAWN EQUIPMENT 00 04 SIMPLICITY RIDING LAWN DWER \$500 te from Schedule A/B: 40.1			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption of abject to adjustment on 4/01/25 and every 3 No  Yes. Did you acquire the property covered	3 years after that for ca	ases fi	·	,

Debtor 1	AARON JAMES SALZER	Case number (if known)	22-50273 WJF

☐ Yes

#### EXHIBIT 'A'

The South 22.47 feet of the South Half of the Northwest Quarter (5½ of NW¼) of Section Four (4), Township Thirty-eight (38) North, Range Thirty (30) West, Fourth Principal Meridian, Benton County, Minnesota, together with that part of the North Half of the Southwest Quarter (N½ of SW¼) of said Section Four (4) lying northerly of the following described line:

Commencing at the southwest corner of said Section 4; thence North 2° 01' 05" West (assumed bearing) along the west line thereof for 1518.59 feet to the point of beginning of the line to be described; thence North 87° 58' 55" East for 375.78 feet; thence North 2° 01' 05" West for 316.10 feet; thence North 80° 42' 45" East for 673.75 feet; thence North 0° 58' 55" West for 385.44 feet; thence South 76° 08' 55" East for 1687.72 feet to the east line of said North Half of the Southwest Quarter and there terminating.

A.P.N. 04.00042.01

Fill in this inf	ormation to identify you	ır case:				
Debtor 1	AARON JAMES	SALZER				
	First Name		Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the	DISTRICT OF MINNESOTA				
Case number	22-50273 WJF					
(if known)	22 002/0 110/				☐ Check	if this is an
					_	led filing
						-
Official Fo	<u>rm 106D</u>					
Schedul	e D: Creditors	Who Have Claims S	ecured	by Propert	V	12/15
				<u> </u>		
	the Additional Page, fill it	If two married people are filing together, out, number the entries, and attach it to				
1. Do any credit	ors have claims secured b	y your property?				
☐ No. Ch	eck this box and submit t	his form to the court with your other so	chedules. You	have nothing else t	o report on this form.	
_		ŕ				
	Il in all of the information	below.				
Part 1: Lis	t All Secured Claims			Calumn A	Calumn D	Caluman C
		more than one secured claim, list the credit		Column A	Column B	Column C
		s a particular claim, list the other creditors in cal order according to the creditor's name.	n Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
- maon ao possion	o, not the diame in diphabet	car craci according to the creation o mario.		value of collateral.	claim	If any
2.1 <b>M&amp;T B</b>		Describe the property that secures the	e claim:	\$342,610.76	\$500,000.00	\$0.00
Creditor's N	lame	16840 HWY 25 NE Rice, MN 56	6367			
		Benton County				
		LEGALLY DESCRIBED AS: SE				
		ATTACHED EXHIBIT A, BENT	ON			
		COUNTY, MINNESOTA				
		PIN: 040004201				
BO BO	X 62182	As of the date you file, the claim is: Ch	eck all that			
	ore, MD 21264	apply.				
	reet, City, State & Zip Code	☐ Contingent				
Number, St	reet, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the	debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 onl		An agreement you made (such as mo	ortanao or socur	rod		
Debtor 2 only	,	car loan)	nigage of Secul	<del>c</del> u		
Debtor 1 and	•	☐ Statutory lien (such as tax lien, mecha	anic's lien\			
_	of the debtors and another	☐ Judgment lien from a lawsuit	umo 3 mem)			
_	s claim relates to a	5	ORTGAGE			
community			<u> </u>			

Date debt was incurred

Last 4 digits of account number 1230

First Name Middle N	lame Last Name				
2.2 SANTANDER CONSUMER USA	Describe the property that secures	the claim:	\$0.00	\$1,000.00	\$0.00
Creditor's Name	2003 DODGE RAM 1500 130 miles VIN: 1D7HU18N73S136248	0,000+			
PO BOX 560284 Dallas, TX 75356-0284	HASNT BEEN DRIVEN IN YIRUSTED OUT  As of the date you file, the claim is: apply.  Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as car loan)	mortgage or secured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	TITLE LIEN, LIEN RE	LEASE SEN	T BUT NOT SIGNED	
Date debt was incurred	Last 4 digits of account num	ber			
Add the dollar value of your entries in O			\$342,610.76 \$342,610.76		

Case number (if known)

\$342,610.76

22-50273 WJF

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Debtor 1 AARON JAMES SALZER

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill i	n this info	rmation to identify your	case:							
Debt	tor 1	AARON JAMES S								
Dobt	tor 2	First Name	Middle Name		Last Name					
Debt (Spou	se if, filing)	First Name	Middle Name		Last Name					
Unite	ed States E	Bankruptcy Court for the:	DISTRICT OF	MINNESOTA						
Case	e number	22-50273 WJF								
(if kno		22-30273 WOI						Check	if this is an	
								amend	ed filing	
Ott:	oial Fau	···· 406⊏/⊏								
		<u>m 106E/F</u>	Usa Havra III		Claima				40/45	-
		E/F: Creditors W					DDIODITY		12/15	
any ex Sched Sched left. A	xecutory co dule G: Exe dule D: Cred ttach the Co and case n	intracts or unexpired leases cutory Contracts and Unexp ditors Who Have Claims Sec ontinuation Page to this pag umber (if known). All of Your PRIORITY Ur	that could result i ired Leases (Offic ured by Property. je. If you have no i	n a claim. Also li al Form 106G). D f more space is l	ist executory contrac To not include any cro needed, copy the Par	ets on Schedule A/B: F editors with partially s rt you need, fill it out, i	Property (Off secured clain number the	icial Fori ns that a entries ir	m 106A/B) a re listed in 1 the boxes	on the
		itors have priority unsecure		0112						
	No. Go to	• •	u viaiiiis ayallist y	ou:						
_	Yes.	71 alt 2.								
		our priority unsecured claims	s. If a creditor has n	nore than one prio	rity unsecured claim. li	ist the creditor separate	ly for each c	aim. For	each claim l	isted.
io P	dentify what bossible, list	type of claim it is. If a claim hat the claims in alphabetical order than one creditor holds a pa	as both priority and it er according to the o	nonpriority amount reditor's name. If	ts, list that claim here a you have more than tv	and show both priority a	ind nonpriorit	y amount	s. As much	as
(	For an expla	anation of each type of claim, s	see the instructions	for this form in the	e instruction booklet.)	Total alaim	Drianitu		Nonneiori	
						Total claim	Priority amount		Nonpriorit amount	y
2.1	-	GIBBS	Last	4 digits of accou	nt number	\$0.00		\$0.00		\$0.00
		Creditor's Name <b>LEASANT RIDGE DR.</b>	When	was the debt in	curred?					
	_	Rapids, MN 56379	Wilci	was the action			_			
	Number	Street City State Zip Code	As of	the date you file	, the claim is: Check	all that apply				
	Who incur	red the debt? Check one.	□ Co	ontingent						
	■ Debtor ′	1 only	□ Uı	nliquidated						
	☐ Debtor 2	2 only	☐ Di	sputed						
	□ Debtor	1 and Debtor 2 only	Туре	of PRIORITY uns	secured claim:					
	☐ At least	one of the debtors and anothe	er 🔳 Do	omestic support of	bligations					
	☐ Check i	f this claim is for a commu	nity debt 🔲 Ta	exes and certain o	ther debts you owe the	e government				
		n subject to offset?	<u> </u>		personal injury while ye	•				
	■ No			her. Specify						
	☐ Yes			DS	SO OBLIGATION	(CURRENT)				
2.2	IRS		Last	4 digits of accou	nt number	Unknown	Hal	known	Hal	known
2.2		Creditor's Name	Last	+ digits of accoun		_ Olikilowii		MIOWII		MIOWII
		OX 7346		was the debt in	curred?		-			
		lelphia, PA 19101-7340 Street City State Zip Code		the date you file	, the claim is: Check	all that apply				
		red the debt? Check one.		ontingent	, the claim is. Check	ан шасарріу				
	■ Debtor			•						
	□ Debtor 2	•		nliquidated						
	_	•		sputed of PRIORITY uns	cocured claim:					
		1 and Debtor 2 only	_	omestic support of						
	_	one of the debtors and anothe		• • • • • • • • • • • • • • • • • • • •						
		f this claim is for a commu	-		ther debts you owe the	=				
		n subject to offset?			personal injury while y	ou were intoxicated				
	■ No □ Yes			her. Specify	DIODITY TAYES					
				75	RIORITY TAXES					

Debt	tor 1 AARON JAMES SALZER	Case num	ber (if known)	22-50273 WJF	
2.3	MINNESOTA DEPT OF REV	Last 4 digits of account number	Unknown	Unknown	Unknown
	Priority Creditor's Name COLLECTION DIVISION PO BOX 64564 Soint Poul MN 55164 0564	When was the debt incurred?		-	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all th	at apply		
	Who incurred the debt? Check one.	☐ Contingent	,		
	■ Debtor 1 only	☐ Unliquidated			
	☐ Debtor 2 only	☐ Disputed			
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the gov	vernment		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you w	ere intoxicated		
	No	Other. Specify			
	Yes	PRIORITY TAXES			
2.4	STEARNS COUNTY HUMAN SERVICES	Last 4 digits of account number	Unknown	\$0.00	\$0.00
	Priority Creditor's Name 705 COURTHOUSE SQUARE Saint Cloud, MN 56303	When was the debt incurred?		-	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all th	at apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	☐ Unliquidated			
	☐ Debtor 2 only	☐ Disputed			
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	lacksquare At least one of the debtors and another	■ Domestic support obligations			
	☐ Check if this claim is for a community debt	☐ Taxes and certain other debts you owe the gov	vernment		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you w	ere intoxicated		
	■ No	Other. Specify			
	☐ Yes	CHILD SUPPORT			
Part	2: List All of Your NONPRIORITY Unsecu	red Claims			
3. [	Do any creditors have nonpriority unsecured claim	s against you?			
[	$\square$ No. You have nothing to report in this part. Submit	this form to the court with your other schedules.			
ı	Yes.				
ι	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c han one creditor holds a particular claim, list the other	aim. For each claim listed, identify what type of claim	n it is. Do not list cla	aims already included in F	Part 1. If more

Total claim

Debto	r 1 AARON JAMES SALZER	Case number (if known) 22-50273 WJF	
4.1	ALLY AUTO FINANCIAL	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 200 W CIVIC CENTER DR. Sandy, UT 84070	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify UNSECURED	
4.2	AMERICAN EXPRESS CA	Last 4 digits of account number	\$2,012.00
	Nonpriority Creditor's Name BOX 0001	When was the debt incurred?	
	Los Angeles, CA 90096-8000  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify UNSECURED	
4.3	AMERICAN EXPRESS CA	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name	When was the debt incurred?	
	BOX 0001 Los Angeles, CA 90096-8000	when was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Other. Specify UNSECURED

Debtor	AARON JAMES SALZER	Case number (if known) 22-50273 WJF	
	AVANT CREDIT	Last 4 digits of account number	\$300.00
	Nonpriority Creditor's Name 222 N LASALLE BLVD #1600 Chicago, IL 60601-1112	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other Specify UNSECURED	
	Li les	Other. Specify ONOLOGINED	
4.5	BENTON COMMUNICATIONS Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	2220 125TH ST. NW Rice, MN 56367	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify UNSECURED	
10	OARITAL ONE		<b>\$4.400.00</b>
4.6	CAPITAL ONE Nonpriority Creditor's Name	Last 4 digits of account number	\$1,460.00
	BANKRUPTCY DEPARTMENT PO BOX 30275	When was the debt incurred?	
	Salt Lake City, UT 84130-0275	As of the data way file the plate in the Ohada all that and	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	_	_	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify UNSECURED	

Debtor 1 AARON JAMES SALZER Case number (if known) 22-50273 WJF

4.7	CENTRACARE ST CLOUD/LITTLE FALLS	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 1406 6TH AVE N	When was the debt incurred?	
	Saint Cloud, MN 56303	-	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify MEDICAL	
4.8	CHASE BANK	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name MAIL CODE: OH4-7164 3415 VISION DR	When was the debt incurred?	
	Columbus, OH 43219  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the damnis. Oneok all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	′	·	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	_ *****	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify UNSECURED	
4.9	COMENITY BANK	Last 4 digits of account number	Unknown
1.0	Nonpriority Creditor's Name		Olikilowii
	BANKRUPTCY DEPARTMENT PO BOX 182273	When was the debt incurred?	
	Columbus, OH 43218-2273  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The entire year may also status of officer all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify UNSECURED	

Debto	or 1 AARON JAMES SALZER	Case number (if known) 22-50273 WJF	
4.1	CREDIT ONE BANK	Last 4 digits of account number	\$498.00
<u> </u>	Nonpriority Creditor's Name PO BOX 98873 Las Vegas, NV 89193-8873	When was the debt incurred?	•
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify UNSECURED	
4.1	CREDIT ONE BANK	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name PO BOX 98873 Las Vegas, NV 89193-8873	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify UNSECURED	
4.1	EAST CENTRAL ENERGY	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name PO BOX 39	When was the debt incurred?	
	Braham, MN 55006  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

■ Other. Specify UNSECURED

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

1 AARON JAMES SALZER	Case number (if known) 22-50273 WJF	
EMERGENCY PHYSICIANS	Last 4 digits of account number	\$462.00
Nonpriority Creditor's Name 7460 80TH ST. S	When was the debt incurred?	ψ402.00
Cottage Grove, MN 55016		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify MEDICAL	
FARMERS AND MERCHANTS STATE BANK	Last 4 digits of account number 0498	\$603,958.94
Nonpriority Creditor's Name 1301 2ND ST. N Sauk Rapids, MN 56379	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify BUSINESS DEBT WITH PERSONAL CLAIM / JUDGMENT	
GREENSTEIN SELLERS PLLC	Last 4 digits of account number	\$1.00
Nonpriority Creditor's Name 825 NICOLLET MALL SUITE 1648 Minneapolis, MN 55402	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	

■ No

☐ Yes

Other. Specify NOTICE

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Debtor 1 AARON JAMES SALZER Case number (if known) 22-50273 WJF 4.1 **HELLER & THYNE, P.A.** \$10,000.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 606 25TH AVE S STE 110 When was the debt incurred? Saint Cloud, MN 56301 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify UNSECURED ☐ Yes 4.1 **IC SYSTEMS** \$778.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 64437 When was the debt incurred? Saint Paul, MN 55164-0437 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify UNSECURED ☐ Yes 4.1 \$1.00

JELLUM LAW	Last 4 digits of account number
Nonpriority Creditor's Name 14985 60TH ST. N	When was the debt incurred?
Stillwater, MN 55082	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply
Who incurred the debt? Check one.	
Debtor 1 only	☐ Contingent
Debtor 2 only	☐ Unliquidated
☐ Debtor 1 and Debtor 2 only	☐ Disputed
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
☐ Check if this claim is for a community	☐ Student loans
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts
☐ Yes	■ Other. Specify COLLECTION

JPMorgan Chase Bank, N.A.	Last 4 digits of account number	\$3,586.0
Nonpriority Creditor's Name PO Box 24714 Columbus, OH 43224	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify AUTO	
JPMorgan Chase Bank, N.A.	Last 4 digits of account number	\$6,259.0
Ionpriority Creditor's Name		. ,
PO Box 24714	When was the debt incurred?	
Columbus, OH 43224  Jumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is. Check all that apply	
Debtor 1 only	Continuent	
	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
■ No ☑ Yes	Other. Specify  UNSECURED	
AY JEWELERS	Last 4 digits of account number	\$4,100.0
Nonpriority Creditor's Name PO BOX 3680	When was the debt incurred?	
Akron, OH 44309		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	

debt

■ No □ Yes

 $\square$  Check if this claim is for a community

Is the claim subject to offset?

■ Other. Specify UNSECURED

 $\square$  Student loans

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

1 AARON JAMES SALZER	Case number (if known) 22-50273 WJF	
KINESIS PHYSICAL THERAPY	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 1521 NORTHWAY DR. Saint Cloud, MN 56303	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify MEDICAL	
LATHROP GPM	Last 4 digits of account number 0498	\$1.00
Nonpriority Creditor's Name 1010 WEST ST GEMAIN ST STE 500 Saint Cloud, MN 56301	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify NOTICE	
LITTLE FALLS ORTHOPEDIC	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 1108 1ST ST. SE	When was the debt incurred?	
Little Falls, MN 56345	As of the later of the the obligation of the later of	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Continues.	
☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	

■ No

☐ Yes

■ Other Specify MEDICAL

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Debto	AARON JAMES SALZER	Case number (if known) 22-50273 WJF	=
4.2 5	MINNESOTA ATTORNEY GENERAL	Last 4 digits of account number 0839	\$1.00
	Nonpriority Creditor's Name ATTN JOAN MARIE EICHHORST 445 MINNESOTA ST STE 900	When was the debt incurred?	
	Saint Paul, MN 55101  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify NOTICE	
4.2	PCG	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 630 ROOSEVELT RD SUITE 101 Saint Cloud, MN 56301	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify UNSECURED	
4.2	ST CLOUD ORTHOPEDIC  Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	1901 CONNECTICUT AVE. S Sartell, MN 56377	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify MEDICAL	

Debto	or 1 AARON JAMES SALZER	Case number (if known) 22-50273 WJF	
4.2	ST. CLOUD ORTHOPEDIC	Last 4 digits of account number	\$42.00
	Nonpriority Creditor's Name 1907 CONNECTICUT AVE. S Sartell, MN 56377	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify MEDICAL	
4.2	TRIMARK USA	Last 4 digits of account number	\$10,572.53
<u> </u>	Nonpriority Creditor's Name 13098 GEORGE WEBER DR. #100 Rogers, MN 55374	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify UNSECURED	
4.3	USAA CREDIT CARD SERVICES	Last 4 digits of account number	Unknown
<u> </u>	Nonpriority Creditor's Name 10750 MCDERMOTT FWY	When was the debt incurred?	
	San Antonio, TX 78288-0570  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the damins. Oneok all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	<u> </u>	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other, Specify UNSECURED	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
<b>Fotal</b>	6f.	Student loans	6f.	\$ 0.00
laims				
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 644,032.47
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 644,032.47

Fill in this information to identify your case:							
Debtor 1							
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNESOTA					
Case number 22-50273 WJF							
(if known)					Check if this is an		
	amended filing						

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code					State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City	·	State	ZIP Code	
2.5			·	·	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
_					

Fill in th	his information to identify your	case:			
Debtor '	1 AARON JAMES S		Loot Name		
Debtor 2		Middle Name	Last Name		
(Spouse if,	, filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Court for the:	DISTRICT OF MINNES	ОТА		
Case nu (if known)	umber 22-50273 WJF			☐ Check if this is an amended filing	
	ial Form 106H edule H: Your Cod	ebtors			12/15
people a fill it out your nar	t, and number the entries in the me and case number (if known	ally responsible for supper boxes on the left. Attach ). Answer every question	olying correct informating the Additional Page to .	on. If more space is nothing this page. On the top	ate as possible. If two married leeded, copy the Additional Page, o of any Additional Pages, write
1. 0	Oo you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
□ N					
Ariz	Within the last 8 years, have you cona, California, Idaho, Louisiana No. Go to line 3. Yes. Did your spouse, former spo	, Nevada, New Mexico, Pu	erto Rico, Texas, Washii		
in li For	ine 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make s	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	APS HOLDINGS, LLC 2 N. BENTON DR. Sauk Rapids, MN 56379			☐ Schedule D, li ☐ Schedule E/F, ☐ Schedule G _ FARMERS AND	
3.2	KEN HILL 1525 6TH AVE. N Sartell, MN 56377			☐ Schedule D, li ☐ Schedule E/F, ☐ Schedule G FARMERS AND	ne , line MERCHANTS STATE BANK
3.3	LITTLE RIVER RESTAUR 15371 183RD ST. N Little Falls, MN 56345	ANTS, INC		☐ Schedule D, li ☐ Schedule E/F, ☐ Schedule G _ TRIMARK USA	, line

	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	LITTLE RIVERS RESTAURANTS, INC 15371 183RD ST. N Little Falls, MN 56345	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G FARMERS AND MERCHANTS STATE BANK
3.5	PHIL COOK 3725 MADISON ST. Klamath Falls, OR 97603	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G FARMERS AND MERCHANTS STATE BANK
3.6	PHIL MORRISON 517 VIA AMALFI Irving, TX 75039	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G FARMERS AND MERCHANTS STATE BANK
3.7	SCOTT HELMBRECHT 6022 PRARIE ROSE DR. Saint Cloud, MN 56303	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G FARMERS AND MERCHANTS STATE BANK

Fill	in this information to	identify your ca	ase:										
Debtor 1 AARON JAMES SALZER													
	btor 2 buse, if filing)						_						
Uni	ited States Bankrupto	cy Court for the:	DISTRICT OF MINNE	SOTA									
Cas	se number 22-5	50273 WJF						Check if this is	3:				
(If kr	nown)							☐ An amend ☐ A supplen	nent showin	g postpetition			
0	fficial Form	106I						MM / DD/		one ming date.			
S	chedule I: \	our Inco	ome					IVIIVI / DD/			12/15		
sup spo atta	plying correct infor use. If you are sepa ch a separate shee	mation. If you arated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, th you, d	and your so not includ	pouse i e inforn	s livi natio	ing with you, inc on about your sp	lude informouse. If mo	nation about ore space is	your needed,		
1.	Fill in your emplo	yment		Debtor	1			Debtor	2 or non-fi	ling spouse			
	If you have more the		Faculty and address	■ Emp	■ Employed			☐ Emp	☐ Employed				
	attach a separate page with information about additional		Employment status	☐ Not	employed	mployed			☐ Not employed				
	employers.		Occupation	SELF-EMPLOYED									
	Include part-time, s self-employed wor		Employer's name	_	H BENTON								
	Occupation may in or homemaker, if it		Employer's address		ENTON DR Rapids, MN		)						
			How long employed the	here?	10+ YEA	RS							
Par	rt 2: Give Deta	ails About Mon	thly Income										
	mate monthly inco		nte you file this form. If y	you have ı	nothing to re	port for a	any l	ine, write \$0 in th	e space. Ind	clude your nor	n-filing		
	ou or your non-filing s e space, attach a se		re than one employer, co	mbine the	information	for all e	mplo	oyers for that pers	on on the li	nes below. If y	you need		
								For Debtor 1		btor 2 or ng spouse			
2.	, ,	<b>O</b> '	ry, and commissions (be calculate what the monthl		- , -	2.	\$	3,180.04	\$	N/A			
3.	Estimate and list	monthly overti	me pay.			3.	+\$	0.00	+\$	N/A			
4.	Calculate gross li	ncome. Add lin	e 2 + line 3.			4.	\$	3,180.04	\$	N/A			

							For De	btor 1			Jebtor 2 -filing sp		
	Copy	y line 4 here			4.		\$	3,180	.04	\$	innig of	N/A	
E	Lint	all maywall dadyyatiana											
5.		all payroll deductions		_			_						
	5a.		Social Security deduct		5a		\$	497		\$		N/A	
	5b.	•	tions for retirement pla		5b		\$	0	.00	\$		N/A	
	5c.	-	ions for retirement plai		5c		\$		.00	\$		N/A	
	5d.	Required repaymen	ts of retirement fund lo	oans	5d	١.	\$		.00	\$		N/A	
	5e.	Insurance			5e		\$	1,013		\$		N/A	
	5f.	Domestic support o	bligations		5f.		\$	359	.93	\$		N/A	
	5g.	Union dues			5g		\$		.00	\$		N/A	
	5h.	Other deductions. S	Specify:		5h	1.+	\$	0	.00	+ \$		N/A	
6.	Add	the payroll deduction	s. Add lines 5a+5b+5c-	+5d+5e+5f+5g+5h.	6.		\$	1,870	.55	\$		N/A	
7.	Calc	ulate total monthly ta	ke-home pay. Subtract	line 6 from line 4.	7.		\$	1,309	.49	\$		N/A	
	8b. 8c. 8d. 8e. 8f.	profession, or farm Attach a statement for receipts, ordinary and monthly net income. Interest and divident Family support payaregularly receive Include alimony, spot settlement, and prope Unemployment com Social Security Other government a Include cash assistant that you receive, such Nutrition Assistance I Specify: VA DISA	usal support, child support, settlement.  Inpensation  Insistance that you reguee and the value (if known as food stamps (benef Program) or housing subtablity  I APPLE SALES (SE	iness showing gross penses, and the total filling spouse, or a deport, maintenance, divorce filling receive wn) of any non-cash as its under the Supplements ides.	8a 8b eendent se 8c 8d 8e sistance ntal 8f.	). ;. !.	\$ \$ \$ \$	0 0 0 0 301 250	.00	\$ \$ \$ \$ \$ \$ \$		N/A N/A N/A N/A N/A	
	8g.	Pension or retireme		LACCIVAL VARILE	8g	١.	\$		.00	\$_		N/A	
	8h.	Other monthly incom	me. Specify:		8h		\$		.00	+ \$		N/A	
		·	. ,			г							7
9.	Add	all other income. Add	d lines 8a+8b+8c+8d+8e	e+8f+8g+8h.	9.	\$	§	551	.74	\$		N/A	
10.	Calc	ulate monthly income	Add line 7 + line 9		10.	\$	1 8	61.23	+ \$		N/A	= \$	1,861.23
		•	r Debtor 1 and Debtor 2	or non-filing spouse.		Ť-	.,0	011.20	•		- 1474	-	1,001120
11.	Inclu- other	de contributions from a r friends or relatives. ot include any amounts	ntributions to the exper in unmarried partner, me is already included in line	embers of your househo	old, your depe						Schedule 11.		0.00
12.		e that amount on the St	t column of line 10 to tummary of Schedules an								12.	\$	1,861.23
												Combin monthly	ed / income
13.	Do y ■	ou expect an increas	e or decrease within th	e year after you file th	is form?								
	_	Yes. Explain: TH	E DEBTOR LIVES W PENSES. THE HOM	ESTEAD MORTGA	GE HASN'T	BE	EEN PA						

Fill	in this information to identify your case:				
Deb	otor 1 AARON JAMES SALZER		Chec	k if this is:	
L.			_	An amended filing	
	ouse, if filing)			A supplement shov 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: DISTRICT OF MINNESOTA		=	MM / DD / YYYY	
1	nown) 22-50273 WJF				
Of	fficial Form 106J				
So	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	s for Separate Househo	<i>ld</i> of Debt	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relations Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	SON		1+ YEAR	Yes
		SON		11+ YEARS	□ No ■ Yes
				14+	□ No
		DAUGHTER		YEARS	Yes
		SON		17+ YEARS	□ No ■ Yes
3.	Do your expenses include expenses of people other than				
	yourself and your dependents?				
Par	t 2: Estimate Your Ongoing Monthly Expenses				
Est exp	imate your expenses as of your bankruptcy filing date unless y benses as of a date after the bankruptcy is filed. If this is a supp blicable date.				
Incl	lude expenses paid for with non-cash government assistance i	f vou know			
the	value of such assistance and have included it on <i>Schedule I:</i> \\frac{1}{2} \text{ficial Form 106I.}			Your expe	enses
4.	The rental or home ownership expenses for your residence. I payments and any rent for the ground or lot.	nclude first mortgage	4. \$		2,364.70
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4a. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		40.00
5.	4d. Homeowner's association or condominium dues  Additional mortgage payments for your residence, such as ho	me equity loops	4d. \$ 5. \$		0.00
J.	Additional mortgage payments for your residence, Such as no	ine equity 10ans	э. ф		0.00

page 2

Official Form 106J

Fill in this info	ormation to identify your	case.				ĺ
Debtor 1	AARON JAMES S	SALZER Middle Name	La	st Name		
Debtor 2	riiotranio	Wilde Halle	La	ot Hamo		
(Spouse if, filing)	First Name	Middle Name	La	st Name		
United States	Bankruptcy Court for the:	DISTRICT OF MINNESOTA				
Case number	22-50273 WJF					
(if known)						☐ Check if this is an amended filing
f two married You must file t	people are filing togethe	n connection with a bankruptcy	for s	supplying correct infor	mation. a false stat	12/15 tement, concealing property, or 00, or imprisonment for up to 20
s	ign Below					
Did you p	pay or agree to pay some	one who is NOT an attorney to	help	you fill out bankrupto	y forms?	
■ No						
☐ Yes.	Name of person					nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the summary a	ınd s	schedules filed with th	is declarati	ion and
Χ /s/ Δ	ARON JAMES SALZEF	₹	х			
AAR	ON JAMES SALZER ture of Debtor 1	-		Signature of Debtor 2		
Date	June 28, 2022			Date		

CHI.	in this into	umation to identify.				
		rmation to identify you				
De	btor 1	AARON JAMES First Name	SALZER Middle Name	Last Name		
De	btor 2					
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States E	Sankruptcy Court for the:	DISTRICT OF MINNESO	TA		
Ca	se number	22-50273 WJF				
(if kı	nown)					heck if this is an
					a	mended filing
<u>Of</u>	ficial F	orm 107				
St	atemen	t of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22
					equally responsible for sup	
		more space is needed, wn). Answer every que		this form. On the top of an	y additional pages, write you	ir name and case
Pa	rt 1: Give	Details About Your Ma	arital Status and Where You	Lived Refore		
				LIVER BOIOIC		
1.	wnat is yo	ur current marital statu	IS?			
	☐ Marrie	ed				
	■ Not m	arried				
2.	During the	last 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	ist all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	I.	
	Debtor 1:		Dates Debtor 1	Debtor 2 Prior Ac	ldress:	Dates Debtor 2
	202101 11		lived there	200101 21 1101 710	(a. 000)	lived there
3.	Within the	last 8 years, did you ev	ver live with a spouse or leg	gal equivalent in a commun	ity property state or territory	? (Community property
stat	es and territ	ories include Arizona, Ca	lifornia, Idaho, Louisiana, Nev	vada, New Mexico, Puerto R	ico, Texas, Washington and W	/isconsin.)
	■ No					
	☐ Yes. N	Make sure you fill out Scl	hedule H: Your Codebtors (Of	fficial Form 106H).		
Pa	t O Evro	ain the Causes of Vau	w Income			
Га	Ехрі	ain the Sources of You	T IIICOIIIE			
4.					ear or the two previous caler	ndar years?
			u received from all jobs and a have income that you receive			
	□ No					
	□ No ■ Yes F	-ill in the details.				
	- 163.1	iii iii tile details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
				exclusions)		and exclusions)
		1 of current year until	■ Wages, commissions,	\$19,792.23	☐ Wages, commissions,	
the	date you fi	led for bankruptcy:	bonuses, tips		bonuses, tips	
			☐ Operating a business		Operating a business	

				Debtor 1			Debtor 2	2		
				Sources of income Check all that apply.	(befo	ss income ore deductions and usions)		s of income Il that apply.	(befor	s income re deductions xclusions)
		■ Wages, commissions, bonuses, tips		\$90,869.66	☐ Wage bonuses	es, commissions, , tips				
				☐ Operating a business			☐ Oper	ating a business		
		dar year be December		■ Wages, commissions, bonuses, tips		\$30,951.22	☐ Wage	es, commissions, , tips		
				☐ Operating a business			☐ Oper	ating a business		
5.	Include include and other winnings.  List each and the list each a	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two ner that income is taxable. Ex pensions; rental income; inte se and you have income that ome from each source separa	amples or rest; divi	of other income are dends; money colle sived together, list it	alimony; chi ected from la only once u	wsuits; royalties; nder Debtor 1.		
				Debtor 1			Debtor 2	,		
				Sources of income Describe below.	each (befo	ss income from a source ore deductions and usions)		of income	(befor	s income re deductions xclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankru	ptcy				
6.	_			's debts primarily consume						
	■ No.			Debtor 2 has primarily consorting personal, family, or household personal.			ots are define	d in 11 U.S.C. §	101(8) as "i	incurred by an
		During the No.	90 days befo Go to line 7	ore you filed for bankruptcy, d	id you pa	ay any creditor a tot	tal of \$7,575°	or more?		
		■ Yes	paid that cr not include	each creditor to whom you pa editor. Do not include payme payments to an attorney for t	nts for do his bank	omestic support obl ruptcy case.	igations, suc	h as child suppo	rt and alimo	
				t on 4/01/25 and every 3 year			n or after the	date of adjustme	ent.	
	⊔ Yes.			or both have primarily consure you filed for bankruptcy, d			tal of \$600 or	more?		
		□ No.	Go to line 7	<b>'</b> .						
		☐ Yes	include pay	each creditor to whom you pa ments for domestic support o this bankruptcy case.						
	Creditor'	's Name an	d Address	Dates of payme	ent	Total amount paid	Amount	you Was thi	is payment	for
	M&T BA PO BOX Baltimo		264	LAST 90 DAY	S	\$7,154.10	\$342,61	0.76 ■ Mort  □ Car □ Crec □ Loar	lit Card n Repaymer oliers or ver	

Debtor 1	AARON JAMES SALZER		Cas	e number (if known)	22-50273 WJF
<i>Insi</i> of was bu	nin 1 year before you filed for bankrupto ders include your relatives; any general par hich you are an officer, director, person in siness you operate as a sole proprietor. 11 ony.	tners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	rships of which you securities; and ar	u are a general partner; corporations by managing agent, including one for
■ □ Ins	No Yes. List all payments to an insider. ider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
insi	nin 1 year before you filed for bankruptcder? ude payments on debts guaranteed or cosi  No Yes. List all payments to an insider		ments or transfer a	ny property on ac	count of a debt that benefited an
Ins	ider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Part 4:	Identify Legal Actions, Repossession	s. and Foreclosures			
List	nin 1 year before you filed for bankrupto all such matters, including personal injury of lifications, and contract disputes.  No  Yes. Fill in the details.				
	se title se number	Nature of the case	Court or agency		Status of the case
of	rmers and Merchants State Bank Pierz vs Aaron Salzer ·CV-22-1860	JUDGMENT	STEELE COUN 111 E. MAIN ST Owatonna, MN	:	☐ Pending ☐ On appeal ■ Concluded  JUDGMENT ENTERED 02/09/2022; \$594778.57
of Lit Sa an	rmers and Merchants State Bank Pierz vs APS Holdings LLC, tle River Restaurants Inc., Aaron Izer, Amy Salzer, Philip Cook, d Scott Helmbrecht -CV-20-498	JUDGMENT	MORRISON CO COURT 213 1ST AVE. S Little Falls, MN	SE	☐ Pending ☐ On appeal ■ Concluded  JUDGMENT ENTERED 02/09/2022; \$594778.57

**Farmers and Merchants State Bank** 

of Pierz vs Aaron Salzer

05-CV-22-381

DISSOLUTION WITH CHILD

**JUDGMENT** 

BENTON COUNTY DISTRICT COURT PO BOX 189 Foley, MN 56329

615 MN-23

Foley, MN 56329

**BENTON COUNTY COURT** 

**02/09/2022; \$594778.57**□ Pending

JUDGMENT ENTERED

☐ Pending

☐ On appeal

Concluded

☐ On appeal

Concluded

	Case title Case number	Nature of the case	Court or agency	Status of th	ie case
	AARON JAMES SALZER vs Commissioner of Public Safety 73-CV-20-839	IMPLIED CONSENT	STEARNS COUNTY COURTHOUSE 725 COURTHOUSE SQUARE Saint Cloud, MN 56303	☐ Pending☐ On appe☐ Conclud	eal
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, foreclosed,	garnished, attached	d, seized, or levied?
	☐ No. Go to line 11.				
	Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the
		Explain what happene	d		property
	FARMERS AND MERCHANTS STATE BANK	WAGES GARNISHE	D	LAST 90 DAYS	\$688.24
	PO BOX 278	☐ Property was reposs	essed.	DATS	
	New York Mills, MN 56567	☐ Property was foreclos			
		■ Property was garnish	ned.		
		☐ Property was attache	ed, seized or levied.		
	☐ Yes. Fill in the details.  Creditor Name and Address	Describe the action the	e creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No □ Yes		erty in the possession of an a	ssignee for the bene	efit of creditors, a
Par	t 5: List Certain Gifts and Contributions				
	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value of more th	an \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift or con-		s or contributions with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		u contributed	Dates you contributed	Value
	, taus 300 (runiber, otreet, oity, state and zir code)				

Case number (if known) 22-50273 WJF

Debtor 1 AARON JAMES SALZER

Pa	rt 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling?							
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lo the amount that insurance has paid. Li ace claims on line 33 of Schedule A/B: I	st pending	Date of your loss	Value of property lost		
Pa	rt 7: List Certain Payments or Transfers	s						
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	preparir	ng a bankruptcy petition?			erty to anyone you		
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You LAMEY LAW FIRM, P.A. 980 INWOOD AVE N OAKDALE, MN 55128-7094 JLAMEY@LAMEYLAW.COM LEAH STICE		Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
			ATTORNEY AND COURT FILIN	05/04/2022 \$2,838				
	DOLLAR LEARNING FOUNDATION INC	,	PRE-FILING CREDIT COUNSEL COURSE	ING	05/09/2022	\$18.99		
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that	ditors o	r to make payments to your creditors		or transfer any prope	erty to anyone who		
	Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have alr  No  Yes. Fill in the details.	ı <b>r busin</b> s made a	ess or financial affairs? as security (such as the granting of a se					
	Person Who Received Transfer		Description and value of	Describe a	any property or	Date transfer was		
	Address Person's relationship to you		•		received or debts	made		
	VIKINGLAND HARLEY DAVIDSON		2016 HARLEY DAVIDSON FLSS	PAID INT	PROCEEDS O NORTH	03/2022		
	NONE		VIN: 1HD1JS916GB041142	_	I INVESTMENTS ER EXPENSES			

Case number (if known) 22-50273 WJF

Debtor 1 AARON JAMES SALZER

Debtor 1 AARON JAMES SALZER Case number (if known) 22-50273 WJF

Person Who Red Address					
Doroenia relatios	Person Who Received Transfer Address Person's relationship to you		alue of ed	Describe any property or payments received or debts paid in exchange	Date transfer was made
	•	2009 5160 BOB		*	
THIRD PARTY			CAT	\$13,000 PORTION OF THE MONEY WENT TO NORTH BENTON INVESTMENTS, LLC TO COVER EXPENSES PORTION OF THE MONEY WENT TO COVER ATTORNEY/LEGAL FEES	05/2022
KENNETH HILI ZAM Propertie NONE.	L & PHILIP MORRISON is, LLC	& THE DEBTOR T HIS MEMBERSH INTEREST (40 U 33.33%) IN ZAM PROPERITIES,	HIP JNITS,	\$147,116.00 CREDITED TO COMPANY LOANS, NO NET "CASH" TO THE DEBTOR. THE DEBTOR'S COMPANY WAS GRANTED AN OPTION TO PURCHASE. AGREEMENT WILL BE PROVIDED TO TRUSTEE.	07/12/2021
NORTH BENTO	ON INVESTMENTS, LLC	VARIOUS SALE PERSONAL PRO FUND BUSINES	OPERTY TO	SEE ABOVE	MARCH AND MAY 2022
	- Carra carra (Na di Carra barabara)	ntcv. did vou transfer an	v property to a self	-settled trust or similar device	
beneficiary? (The	ese are often called asset-pro		, , , , , , , , , , , , , , , , , , , ,		e of which you are a
	ese are often called asset-pro		, , , , , , , , , , , , , , , , , , , ,		e of which you are a
beneficiary? (The	ese are often called asset-pro	otection devices.)	alue of the propert		e of which you are a  Date Transfer was made
beneficiary? (The No No Yes. Fill in the Name of trust	ese are often called asset-pro	Description and v	alue of the propert	y transferred	Date Transfer was
beneficiary? (The No No Yes. Fill in the Name of trust  Part 8: List of Cert  20. Within 1 year before sold, moved, or to Include checking houses, pension No	ese are often called asset-pro- e details.  tain Financial Accounts, In: fore you filed for bankruptoransferred? In savings, money market, of funds, cooperatives, associated	Description and vertical properties of the control	alue of the propert Boxes, and Storag counts or instrume	y transferred	Date Transfer was made your benefit, closed,
beneficiary? (The No No Yes. Fill in the Name of trust  Part 8: List of Cert  20. Within 1 year befsold, moved, or to Include checking houses, pension No Yes. Fill in the	ese are often called asset-pro- e details.  tain Financial Accounts, Incore you filed for bankruptoransferred? I, savings, money market, of funds, cooperatives, associate details.	Description and vestruments, Safe Deposit y, were any financial account of the financial account	alue of the propert Boxes, and Storag counts or instrume nts; certificates of o ncial institutions.	y transferred ge Units nts held in your name, or for deposit; shares in banks, cred	Date Transfer was made  your benefit, closed, tit unions, brokerage
beneficiary? (The No No Yes. Fill in the Name of trust  Part 8: List of Cert 20. Within 1 year befsold, moved, or to Include checking houses, pension No Yes. Fill in the Name of Financi	ese are often called asset-pro- e details.  tain Financial Accounts, In: fore you filed for bankruptoransferred? In savings, money market, of funds, cooperatives, associated	Description and vertical properties of the control	alue of the propert Boxes, and Storag counts or instrume	y transferred ge Units nts held in your name, or for deposit; shares in banks, cred	Date Transfer was made your benefit, closed,

21.		Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
		No								
		Yes. Fill in the details.								
		ame of Financial Institution ddress (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
22.	Hav	ve you stored property in a storage unit or pla	ace other than your home within 1 y	year before you filed for bankruptcy?	?					
		No								
		Yes. Fill in the details.								
		ame of Storage Facility ddress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
Pai	rt 9:	Identify Property You Hold or Control for S	Someone Else							
23.		you hold or control any property that someon someone.	ne else owns? Include any propert	y you borrowed from, are storing for	, or hold in trust					
		No								
		Yes. Fill in the details.								
		wner's Name ddress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Pai	rt 10	Give Details About Environmental Informa	tion							
ı a	LIV	Give Details About Environmental informa	uon							
or	the	purpose of Part 10, the following definitions a	apply:							
	tox	<i>vironmental law</i> means any federal, state, or I tic substances, wastes, or material into the air julations controlling the cleanup of these sub	r, land, soil, surface water, ground							
		e means any location, facility, or property as o own, operate, or utilize it, including disposal s		w, whether you now own, operate, o	or utilize it or used					
		zardous material means anything an environn zardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	ubstance,					
Rер	ort a	t all notices, releases, and proceedings that you know about, regardless of when they occurred.								
24.	Has	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	_	No								
	Ξ	Yes. Fill in the details.								
	Na	ame of site	Governmental unit	Environmental law, if you	Date of notice					
		ddress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	know it	Date of Hotioc					
25.	Hav	ve you notified any governmental unit of any	release of hazardous material?							
		No								
		Yes. Fill in the details.								
		ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
			,							

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.									
	■ No								
	☐ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	rt 11: Give Details About Your Business or	Connections to Any Business							
	Within 4 years before you filed for bankrupt	-	v of the following connections to any	husiness?					
	☐ A sole proprietor or self-employed in			business.					
	■ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	■ A member of a minited habinty company (EEG) of minited habinty partnership (EEF)								
	☐ An officer, director, or managing ex	ecutive of a cornoration							
	☐ An owner of at least 5% of the voting								
	☐ No. None of the above applies. Go to F								
	_								
	Yes. Check all that apply above and fill Business Name	Describe the nature of the business	Employer Identification number						
	Address		Do not include Social Security						
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed						
	NORTH BENTON INVESTMENTS INC	OPERATES OLD CAPITAL TAVERN	EIN: 45-2998627						
	2 N Benton Drive Sauk Rapids, MN 56379		From-To AUGUST 11 2011 -	CURRENT					
	NORTH BENTON PROPERITIES		EIN: 86-3565063						
	2 N BENTON DR. Sauk Rapids, MN 56379		From-To APRIL 29 2021 - C	JRRENT					
	S&S EVENT SERVICES LLC	CATERING, EVENT AND	EIN: 84-2284164						
	2 N. BENTON DR. Sauk Rapids, MN 56379	STAFFING SERVICES	From-To JULY 02 2019 - CU	RRENT					
	ROOM 27, LLC	SMALL EVENT SPACE	EIN:						
	2 N BENTON DR. Sauk Rapids, MN 56379		From-To 12/11/2018 - 02/25/	2020					
	LITTLE RIVER RESTAURANTS, INC	OPERATED CABIN FEVER/13	EIN: 82-4544040						
	2 N BENTON DR. Sauk Rapids, MN 56379	STILLS SALOON	From-To 02/26/2018 - 02/12/	2021					
	DANIEL BUILDING LLC	PART OF A REFINANCE OF Z.A.M	η EIN:						
	2 N BENTON DR. Sauk Rapids, MN 56379	PROPERITIES	From-To 04/03/2017 - 02/24/	2020					
	Z.A.M PROPERITIES LLC	BUILDING RENTAL	EIN: 45-2970981						
	1525 6TH AVE. N Sartell, MN 56377		From-To 08/08/2011 - CURR	ENT					

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed		
703 ST. GERMAIN LLC 2 N. BENTON DR. Sauk Rapids, MN 56379	PART OF A REFINANCE OF Z.A.M PROPERITIES	EIN:	04/03/2017 - 02/24/2020	
2 N BENTON DR. LLC 2 N. BENTON DR Sauk Rapids, MN 56379	PART OF A REFINANCE OF Z.A.M PROPERITIES	EIN: From-To	04/03/2017 - 02/24/2020	
SERIOUSLY CORPORATE INCORPORATED 2 N BENTON DR. Sauk Rapids, MN 56379	CONSULTING BUSINESS	EIN: From-To	83-1919518 03/17/2017 - 02/20/2020	
DREAMFUNDERS 2 N BENTON DR. Sauk Rapids, MN 56379	NON-PROFIT	EIN: From-To	02/23/2018 - 02/11/2021	
APS HOLDINGS, LLC 2 N BENTON DR. Sauk Rapids, MN 56379	OWNED THE PROPERTY THAT HELD CABIN FEVER/13 STILLS SALOON	EIN: From-To	82-2161338 07/14/2017 - 02/17/2021	
36 7TH AVE. N LLC 2 N BENTON DR. Sauk Rapids, MN 56379	PART OF REFINANCE OF Z.A.M PROPERITIES	EIN: From-To	04/03/2017 - 02/24/2020	
HOMESTEAD LAND LEASE 16840 HWY 25 NE. Rice, MN 56367	HOMESTEAD LAND LEASE (FOR DISCLOSURE PURPOSES, NO WRITTEN LEASE)  SCHLENNER WENNER & CO.	EIN: From-To	DEBTORS SSN 2016 - 2020	
APPLE SALES FROM HOMESTEAD 16840 HWY 25 NE. Rice, MN 56367	APPLE SALES FROM HOMESTEAD PROPERTY SCHLENNER WENNER & CO	EIN: From-To	DEBTORS SSN 2016 - 2020	
Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	tcy, did you give a financial statement to an	iyone abou	t your business? Include all financial	
Yes. Fill in the details below.	Date Issued			
Address (Number, Street, City, State and ZIP Code)				

Part 12: Sign Below		
	false statement, concealing property, or ob	eclare under penalty of perjury that the answers staining money or property by fraud in connection rs, or both.
/s/ AARON JAMES SALZER AARON JAMES SALZER Signature of Debtor 1	Signature of Debtor 2	
Date June 28, 2022	Date	
Did you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
■ No		
□Yes		

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case number (if known) 22-50273 WJF

Debtor 1 AARON JAMES SALZER

■ No

Fill in this inform	nation to identify your	case:				
Debtor 1	AARON JAMES S			Lead Name		
Debtor 2	First Name	Middle Name		Last Name		
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF MII	NNESOTA			
Case number	2-50273 WJF					☐ Check if this is an amended filing
If you are an indiv		oter 7, you must fil		Filing Under Ch	napter 7	12/15
■ you have lease You must file this	ed personal property a s form with the court w ver is earlier, unless th	nd the lease has n ithin 30 days after	you file you	r bankruptcy petition or by th use. You must also send cop		
•	ople are filing together d date the form.	in a joint case, bo	th are equal	ly responsible for supplying o	correct information	ation. Both debtors must
write yo	our name and case nun	nber (if known).	s needed, att	ach a separate sheet to this f	orm. On the to	p of any additional pages,
	our Creditors Who Have ors that you listed in Pa		: Creditors \	Who Have Claims Secured by	Property (Offi	cial Form 106D), fill in the
information be				ou intend to do with the prop		Did you claim the property as exempt on Schedule C?
Creditor's <b>M</b> aname:	&T BANK			der the property. the property and redeem it.		□ No
Description of property securing debt:	16840 HWY 25 NE 56367 Benton Cou LEGALLY DESCRI ATTACHED EXHIB BENTON COUNTY	inty BED AS: SEE IT A,	Retain Reaffin	the property and enter into a symation Agreement. the property and [explain]:		■ Yes
	PIN: 040004201	,				
Creditor's SA	ANTANDER CONSU	MER USA		der the property. the property and redeem it.		□ No
Description of property securing debt:	2003 DODGE RAM 130,000+ miles VIN: 1D7HU18N73		☐ Retain Reaffin	the property and enter into a mation Agreement. the property and [explain]:		■ Yes
Ū	HASNT BEEN DRIV	/EN IN				

**YEARS - RUSTED OUT** 

Part 2: List Your Unexpired Personal Property Leases		
For any unexpired personal property lease that you listed in Schedule G: Executor in the information below. Do not list real estate leases. Unexpired leases are leases you may assume an unexpired personal property lease if the trustee does not assu	that are still in effect; the	lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name:		□ No
Description of leased		
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		□ Vaa
Tropony.		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
		□ res
Lessor's name:		□ No
Description of leased Property:		☐ Yes
• •		<b>—</b> 163
Lessor's name:		□ No
Description of leased Property:		☐ Yes
		<b>-</b> 100
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease.	perty of my estate that sec	ures a debt and any personal
X /s/ AARON JAMES SALZER X		

X	/s/ AARON JAMES SALZER	X	
	AARON JAMES SALZER		Signature of Debtor 2

Signature of Debtor 1

Date June 28, 2022

## **United States Bankruptcy Court**District of Minnesota

In re	AARON JAMES SALZER			Case No.	22-5	50273 WJF
	Debto			Chapter	7	
	DISCLOSURE OF COMPENSATION (	<b>)F</b>	ATTORNE	Y FOR D	ЕВТ	OR
paid to	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b(s)) and that compensation paid to me within one year before me, for services rendered or to be rendered on behalf of the aptcy case is as follows:	the	e filing of the p	etition in l	oankr	uptcy, or agreed to be
Prior	gal Services, I have agreed to acceptto the filing of this statement I have received	\$ \$ \$	2,500.00 2,500.00 0.00			
_	he source of the compensation paid to me was:  Debtor  Other (specify)	L	EAH STICE			
_	he source of the compensation to be paid to me is:  Debtor  Other (specify)					
	I have not agreed to share the above-disclosed compensate of my law firm.	ion	with any other	er person u	nless	they are members and
associ	I I have agreed to share the above-disclosed compensation ates of my law firm. A copy of the agreement, together wit mpensation, is attached.					
	n return for the above-disclosed fee, together with such fued by 11 U.S.C. §528(a)(1), I have agreed to render legal ser					
	Analysis of the debtor's financial situation, and rendering etition in bankruptcy;	ıg a	dvice to the d	ebtor in de	etermi	ining whether to file a
b	Preparation and filing of any petition, schedules, statemen	ts o	of affairs and p	lan which	may t	pe required;
	Representation of the debtor at the meeting of creditors nereof;	and	d confirmation	hearing,	and a	ny adjourned hearings
d	Representation of the debtor in contested bankruptcy matt	ers;	and			

6. Pursuant to Local Rules 1007-1 and 1007-3-1, I have advised the debtor of the requirements in the Statement of Financial Affairs to disclose all payments made, or property transferred, by or on behalf of the debtor to any person, including attorneys, for consultation concerning debt consolidation or reorganization, relief under bankruptcy law, or preparation of a petition in bankruptcy. I have reviewed the debtor's disclosures and they are accurate and complete to the best of my knowledge.

**e.**. Other services reasonably necessary to represent the debtor(s).

### CERTIFICATION

	JOHN D. LAMEY III 0312009							
	/s/ JOHN D. LAMEY III							
Dated: June 28, 2022	Signature of Attorney							
statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy cas								
I certify that the foregoing, together with the written contract required by 11 U.S.C. §528(a)(1), is a complete								

Fill i	n this information to identify your case:				directed in this form and	in Form
Deb	tor 1 AARON JAMES SALZER		122	2A-1Supp:		
Debi	tor 2		'	■ 1. There is no pres	sumption of abuse	
Unite	ed States Bankruptcy Court for the: District of Minnesot	<u>a</u>	'	applies will be	to determine if a presurmade under <i>Chapter 7</i>	
1	e number			Calculation (Of	ficial Form 122A-2).	
(if kno	wn)				t does not apply now be y service but it could ap	
				☐ Check if this is a	an amended filing	
Off	icial Form 122A - 1					
Ch	apter 7 Statement of Your Curr	ent Mor	nthly Inc	ome		12/19
attach case	complete and accurate as possible. If two married people are a separate sheet to this form. Include the line number to who number (if known). If you believe that you are exempted from ying military service, complete and file Statement of Exempted 1:  Calculate Your Current Monthly Income	nich the addition a presumption	nal information a of abuse becau	ipplies. On the top of a se you do not have pri	any additional pages, wri	te your name and or because of
1.	What is your marital and filing status? Check one only	<b>y</b> .				
	□ Not married. Fill out Column A, lines 2-11.					
	$\hfill\square$ Married and your spouse is filing with you. Fill out	both Columns	A and B, lines	2-11.		
	$\square$ Married and your spouse is NOT filing with you. Y	ou and your s	spouse are:			
	☐ Living in the same household and are not legall	ly separated. I	Fill out both Co	lumns A and B, lines	2-11.	
	☐ Living separately or are legally separated. Fill on penalty of perjury that you and your spouse are legaliving apart for reasons that do not include evading	gally separated	d under nonban	kruptcy law that appl	ies or that you and you	
10 th	Il in the average monthly income that you received from all so 11(10A). For example, if you are filing on September 15, the 6-more 6 months, add the income for all 6 months and divide the total bouses own the same rental property, put the income from that pro	nth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh August 31. If the am de any income amount r	ount of your monthly incon nore than once. For examp	ne varied during ble, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	nd commissio	ons (before all	\$	\$	
	<b>Alimony and maintenance payments.</b> Do not include p Column B is filled in.	•	•	\$	\$	
4.	All amounts from any source which are regularly pai of you or your dependents, including child support. I from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo filled in. Do not include payments you listed on line 3.	Include regular your depende	contributions nts, parents,	\$	\$	
5.	Net income from operating a business, profession, o					
			otor 1			
	Gross receipts (before all deductions)	\$				
	Ordinary and necessary operating expenses	Ť ———	Conv boro	\$	¢	
	Net monthly income from a business, profession, or farm		Copy nere ->	<b>4</b>	Φ	
6.	Net income from rental and other real property	Deh	otor 1			
	Gross receipts (before all deductions)	\$				
	Ordinary and necessary operating expenses	-\$				
	Net monthly income from rental or other real property	\$	Copy here ->	\$	\$	
		Ψ		<u>\$</u>	\$	
1.	Interest, dividends, and royalties			Ψ		

						Column A Debtor 1		Column B  Debtor 2 or non-filing sp	oouse	
8.	Unem	ployr	ment compensation			\$		\$		
	the So	ocial S	er the amount if you contend that the amount Security Act. Instead, list it here:							
	For	you <sub></sub>	spouse \$							
0	For	your	spouse \$		_					
9.	benefit not inc United disabil pay pa does r	it unde clude d State lity, or aid un not ex	er retirement income. Do not include any ame of the Social Security Act. Also, except as so any compensation, pension, pay, annuity, of es Government in connection with a disability of death of a member of the uniformed service der chapter 61 of title 10, then include that proceed the amount of retired pay to which you der any provision of title 10 other than chapter	tated in the next senten or allowance paid by the ty, combat-related injur- ces. If you received any pay only to the extent the or would otherwise be er	nce, do e y or retired nat it	\$		\$		
10.	Do not receive domes United disabil	t inclured as stic ted State lity, or	In all other sources not listed above. Spude any benefits received under the Social Space a victim of a war crime, a crime against hur perforism; or compensation pension, pay, and es Government in connection with a disability of a member of the uniformed service a separate page and put the total below.	Security Act; payments manity, or international nuity, or allowance paid ty, combat-related injury	or by the y or					
		•				\$		\$		
						\$		\$		
		То	tal amounts from separate pages, if any.		+	\$		\$		
11.			your total current monthly income. Add lir in. Then add the total for Column A to the to		\$		+		= \$	
							J [			ent monthly
Part	2.	Dete	ermine Whether the Means Test Applies t	o You					income	
ı aıı	۷.	Dete	Timile Whether the means rest Applies t	0 100						
12.	Calcu	ılate y	our current monthly income for the year	. Follow these steps:						
	12a. C	Сору	your total current monthly income from line 1	11		Сору	line 11 h	ere=>	\$	
			•							
	N	<b>J</b> ultipl	ly by 12 (the number of months in a year)						<b>x</b> 12	
	12b. T	Γhe re	sult is your annual income for this part of the	e form				12b.	\$	
									Ψ	
13.	Calcu	late t	he median family income that applies to	you. Follow these steps	s:					
	Fill in t	the st	ate in which you live.							
			,							
	Fill in t	the nu	umber of people in your household.							
	Fill in t	the m	edian family income for your state and size	of household.				13.	\$	
			et of applicable median income amounts, go n. This list may also be available at the bank	online using the link sp				ions		
14.	How o	do the	e lines compare?							
	14a. 14b.		Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official Line 12b is more than line 13. On the top of	Form 122A-2.						<b>1-2</b> .
		_	Go to Part 3 and fill out Form 122A–2.	, -g- , ccon box 2,	pr				<i>(LL)</i>	<del></del>
Part	3:	Sign	n Below							
	В	By sig	ning here, I declare under penalty of perjury	that the information on	this sta	atement and i	n any atta	chments is tru	e and corre	ect.
	X		AARON JAMES SALZER RON JAMES SALZER							
			nature of Debtor 1							
	Date		ne 28, 2022 / DD / YYYY							

Case number (if known) 22-50273 WJF

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this in	torma	ation to identify your case:			
Debtor 1	A	ARON JAMES SALZER			
Debtor 2 (Spouse, if fil	ing)				
United States	Bank	ruptcy Court for the: _District of Minnesota			
Case numbe (if known)	r <u>22</u>	2-50273 WJF		☐ Check if this is an amended filing	
		m 122A - 1Supp	<b>A</b> I-		
Statemo	ent	of Exemption from Presumption of	Ab	use Under § 707(b)(2)	12/1
exempted fro exclusions in required by 1	m a p this 1 U.S	nt together with Chapter 7 Statement of Your Current Monthly resumption of abuse. Be as complete and accurate as possib statement applies to only one of you, the other person should .C. § 707(b)(2)(C).  y the Kind of Debts You Have	le. If t	wo married people are filing together, and any	of the
persona	I, fam	ts primarily consumer debts? Consumer debts are defined in 11 ily, or household purpose." Make sure that your answer is consisteing for Bankruptcy (Official Form 1).			
■ No.		o Form 122A-1; on the top of page 1 of that form, check box 1, <i>The</i> lement with the signed Form 122A-1.	ere is r	no presumption of abuse, and sign Part 3. Then sub	omit this
☐ Yes.	Go to	Part 2.			
Part 2:	etern	nine Whether Military Service Provisions Apply to You			
		abled veteran (as defined in 38 U.S.C. § 3741(1))?			
□ No.					
☐ Yes.	•	ou incur debts mostly while you were on active duty or while you w	vere p	erforming a homeland defense activity?	
_		S.C. § 101(d)(1); 32 U.S.C. § 901(1).			
_	No.	Go to line 3.			
	Yes.	Go to Form 122A-1: on the top of page 1 of that form, check box submit this supplement with the signed Form 122A-1.	1, <i>The</i>	ere is no presumption of abuse, and sign Part 3. Th	en
3. Are you	or ha	ave you been a Reservist or member of the National Guard?			
☐ No.	Cor	nplete Form 122A-1. Do not submit this supplement.			
☐ Yes.	We	re you called to active duty or did you perform a homeland defense	e activ	ity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).	
	No.	Complete Form 122A-1. Do not submit this supplement.			
	Yes.	Check any one of the following categories that applies:			
		I was called to active duty after September 11, 2001, for at lea 90 days and remain on active duty.	ast	If you checked one of the categories to the left, go 122A-1. On the top of page 1 of Form 122A-1, che The Means Test does not apply now, and sign 120	eck box 3, rt 3. Then
		I was called to active duty after September 11, 2001, for at lease 90 days and was released from active duty on which is fewer than 540 days before I file this bankruptcy case.	ast '	submit this supplement with the signed Form 122/ are not required to fill out the rest of Official Form during the exclusion period. The exclusion period the time you are on active duty or are performing a	122A-1 means a
		I am performing a homeland defense activity for at least 90 d	lays.	homeland defense activity, and for 540 days after	ward. 11

, which is fewer than 540 days before I

 $\hfill \Box$  I performed a homeland defense activity for at least 90 days,

ending on \_\_\_\_\_\_\_file this bankruptcy case.

If your exclusion period ends before your case is closed, you may have to file an amended form later.

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court District of Minnesota

In re AARON JAMES SALZER		Case No.	22-50273 WJF						
	Debtor(s)	Chapter	_7						
VERIFICATION OF CREDITOR MATRIX									
The above-named Debtor hereby verifies that the	attached list of creditors is true and	correct to the best	of his/her knowledge.						
Date: June 28, 2022	/s/ AARON JAMES SALZER								
	AARON JAMES SALZER								
	Signature of Debtor								